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UTILITY PATENT APPLICATION TRANSMITTAL

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Address to:
Box PATENT APPLICATION
 Commissioner of Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Attorney Docket No.	CHEN3647/EM
First Named Inventor (or identifier)	Yi-Chia CHEN
Total Pages	95

Transmitted herewith is a patent application under 37 CFR 1.53(b).

Entitled:	Method And System For Automatic Service Composition
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1. Submitted herewith are the following:

31 pages of specification, including claims and Abstract.

12 sheets of FORMAL drawings (Figs. 1-12).

23 claims.

1 Oath/Declaration signed by each inventor.

1 Application Data Sheet.

1 Assignment of the invention to Industrial Technology Research Institute, Chutung, Hsinchu, Taiwan R.O.C.,

Cover Sheet, and payment of the \$40 recordal fee.

1 certified copy of Taiwan application no. 092130952. Priority is claimed.

1 check in the amount of \$864 (\$770- Filing Fee; \$54- Extra Dependent Claim Fee; \$40- Assignment Recordation Fee).

2. SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.

3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.

4. Insert before the first sentence of the specification: -- This application claims the benefit of provisional application number _____ filed _____. --

5. Insert before the first sentence of the specification: -- This application is a Continuation-in-part of nonprovisional application number _____ filed _____. --

6. Other: _____.

The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.

THE FILING FEE IS CALCULATED AS FOLLOWS:

Basic Fee: \$770.00

Total Claims:	23	- 20 =	3.00	X \$18 =	\$54.00
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Independent Claims:	2	- 3 =	0	X \$86 =	\$0.00
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Correspondence Address:
BACON & THOMAS, PLLC
 625 Slaters Lane, 4th Floor
 Alexandria, VA 22314-1176

23364
CUSTOMER NUMBER

Multiple Dependent Claim (add \$290.00): \$0.00

Subtotal: \$824.00

50% Reduction if Small Entity Status: \$0.00

Phone: 703-683-0500	Fax: 703-683-1080	Total:	\$824.00
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Date:	Name:	Signature:	Reg. No.
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March 30, 2004	Eugene Mar		25,893
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